

BOWDITCH & DEWEY, LLP

012704

UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 C.F.R. 1.53(b))		Attorney Docket No.		301505.1363-110	
		First Named Inventor or Application Identifier		Richard P. Rava	
		Express Mail Label No.		ET817713489US	
Title of Invention		SYSTEMS AND METHODS OF MOLECULAR SPECTROSCOPY TO PROVIDE FOR THE DIAGNOSIS OF TISSUE			
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.			ADDRESS TO: Mail Stop PATENT APPLICATION Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450		
1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)			6. <input type="checkbox"/> Microfiche Computer Program (Appendix)		
2. <input checked="" type="checkbox"/> Specification [Total Pages 45] (preferred arrangement set forth below) <ul style="list-style-type: none"> - Descriptive title of the invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to microfiche Appendix - Background of the Invention - Summary of the Invention - Brief Description of the Drawings - Detailed Description - Claim(s) - Abstract of the Disclosure 			7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence (if applicable, all necessary) <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) [] Pages c. <input type="checkbox"/> Statement verifying identity of above copies 		
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 23] <input checked="" type="checkbox"/> Formal [] Informal <input checked="" type="checkbox"/> Fig. of the Drawings for Publication 17			ACCOMPANYING APPLICATION PARTS		
4. <input checked="" type="checkbox"/> Oath or Declaration/POA [Total Pages 9] <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 C.F.R. 1.63(d)) (for continuation/divisional with Box 18 completed) [NOTE Box 5 below] <ul style="list-style-type: none"> i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting Inventor(s) named in the prior application, see 37 C.F.R. 1.63(d)(2) and 1.33(b). 			8. <input type="checkbox"/> Assignment Papers (cover sheet & documents) <input checked="" type="checkbox"/> Assignee - Massachusetts Institute of Technology Cambridge, Massachusetts		
5. <input checked="" type="checkbox"/> Incorporation By Reference (usable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.			9. <input type="checkbox"/> 37 C.F.R. 3.73(b) Statement [] Power of Attorney (when there is an assignee)		
			10. <input type="checkbox"/> English Translation Document (if applicable)		
			11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 [] Copies of IDS Citations		
			12. <input type="checkbox"/> Preliminary Amendment		
			13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)		
			14. <input type="checkbox"/> Small Entity Statement(s) [] Statement filed in prior application, status still proper and desired		
			15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)		
			16. <input type="checkbox"/> Nonpublication Request (check parent application)		
			17. <input checked="" type="checkbox"/> Other: <u>Revocation of Powers of Attorney and Appointment of New Attorneys and/or Agents and Change of Correspondence Address</u>		
18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: <input checked="" type="checkbox"/> Continuation [] Divisional [] Continuation-in-part (CIP) of prior application No.: 08/107,854 Prior application information: Examiner: Ruth S. Smith Group Art Unit: 3737					
19. CORRESPONDENCE ADDRESS					
NAME		THOMAS O. HOOVER, ESQ.			
		BOWDITCH & DEWEY, LLP			
ADDRESS		161 Worcester Road, P.O. Box 9320			
CITY	Framingham	STATE	MA	ZIP CODE	01701-9320
COUNTRY	USA	TELEPHONE	(508) 879-5700	FAX	(508) 929-3073
Signature		[Signature]		Date	January 27, 2004
Submitted by Typed or Printed Name		Thomas O. Hoover		Reg. Number	32,470

012704

BOWDITCH & DEWEY, LLP

FEE TRANSMITTAL FOR PATENT APPLICATIONS	Attorney Docket Number	301505.1363-110
	Application Number	Not Assigned
	Confirmation Number	Not Assigned
	First Named Inventor	Richard P. Rava

CLAIM CALCULATION (includes any preliminary amendment)

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(b) or (j))	18* - 20* =	0*	x \$ 18 =	\$ 0
	INDEPENDENT CLAIMS (37 CFR 1.16(b) or (j))	4* - 3** =	1*	x \$ 86 =	\$ 86
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))			+ \$ 290 =	\$ 0
				BASIC FEE (37 CFR 1.16(a) or (h))	\$ 770
				Total of above Calculations =	\$ 856
	Reduction by 50% for filing by small entity (37 CFR 1.9, 1.27, 1.28) =				\$
				TOTAL =	\$ 856
	Surcharge – Late Filing of Declaration or Filing Fees (37 C.F.R. 1.16(e)) =				\$ 0
	Petition for Extension of Time Fee (37 C.F.R. 1.17) =				\$
	Assignment Recordation Fee = (only when filed with application)				\$ 0
	* Reissue claims in excess of 20 and over original patent				
	** Reissue independent claims over original patent			TOTAL =	\$ 856


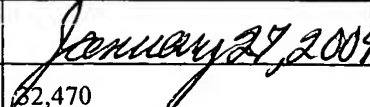
1. Small entity status:

- a. ☐ A small entity statement is enclosed.
b. ☐ A small entity statement was filed in the prior non-provisional application and such status is still proper and desired.
c. ☐ is no longer claimed.

2. ☒ A general authorization is hereby granted to charge deposit account number 50-1935 for any fees required under 37 CFR §1.16 and §1.17 in order to maintain pendency of this application.
A copy of this authorization is enclosed for accounting purposes.

3. ☒ A check is enclosed for \$856.00. ☐ Please charge \$[] to Deposit Account No.

4. ☐ Other: _____

Signature		Date	
Submitted by Typed or Printed Name	Thomas O. Hoover	Reg. Number	82,470